•								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003								10/6/3668					
		CLAIMS A	S FILED (Column			(Column 2)		SMALL ENTITY TYPE		OR		OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			W					ATE	FEE	7	RATE	FEE	
FOR			NUMBEF	NUMBER FILED		NUMBER EXTRA		IC FEE	E 385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			mi	minus 20=		*		9=	†	OR	X\$18=		
INDEPENDENT CLAIMS				minus 3 =		*		X43=		OR	X86=		
ML	JLTIPLE DEPE	NDENT CLAIM P	RESENT	RESENT			+14	45=		OR	+290=		
* if	the difference	e in column 1 is	less than z	ero, enter	"0" in (column 2	lumn 2 , TOTA		 	OR	TOTAL	 	
CLAIMS AS AMENDED - PART II						7-20-0	14		<u> </u>	1 -	OTHER	THAN	
			(Colun	nn 2)	(Column 3)	(Column 3) SMAL		ENTITY	OR	SMALL			
ENT A		CLAIMS REMAINING , AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER OUSLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	· 33	Minus	* 3	0	= .3	X\$	9=		OR	X\$18=	5400	
ME	Independent	* 5	Minus	***	3	= 2	X4:	3=		OR	X86=	1770	
	FIRST PRESE	ENTATION OF MI	ULTIPLE DEI	PENDENT	CLAIM		+14	5_		1 1	+290=	1.12	
								OTAL		OR	TOTAL	199104	
							ADDIT.			OR,	ADDIT, FEE	6-6-165	
	ř	(Column 1) CLAIMS	T	(Colum	EST	(Column 3)			ADDI-			ADDI-	
MENT B		REMAINING AFTER AMENDMENT		PREVIO PAID F	USLY	PRESENT EXTRA	RAT	ΓE	TIONAL FEE		RATE	TIONAL FEE	
MON	Total	*	Minus	**		=	X\$:	9=		OR	X\$18=		
AMEND	Independent	*	Minus	***		=	X43	3=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+145			İ	+290=		
	w.							D= DTAL		OR	+290= TOTAL	•	
								FEE		OR ,	ADDIT. FEE		
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST										,			
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA	RAT	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NON	Total	*	Minus	**		= .	X\$ 9)=		OR	X\$18=		
IME	Independent	*	Minus	***		=	X43	_		OR	X86=		
	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	'ENDENT	CLAIM		-	-				•	
And the second s										OR	+290=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR A	TOTAL DDIT. FEE		
T	he *Highest Num	iber Previously Paid	J For" (Total or	Independer	nt) is the	highest number	found in th	e appi	ropriate box	in colu	ımn 1.		